Best Available Copy

								Application or Docket Number						
PATENT APPLICATION FEE DETERMINATION RECOF										10/6	33	297		
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			,OR	OTHER THAN SMALL ENTITY		
TOTAL CLAIMS							ſ	RATE	Ξ	FEE	1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS			30 minus 20=		*	10		X\$ 9:	=		OR	X\$18=		
INDEPENDENT CLAIMS			5 minus 3 =		* <i>y</i> !	2	Ī	X40=	-	84	OR	X80=		
MU	ILTIPLE DEPEN	NDENT CLAIM P	RESENT	_			ŀ	+135	_	0 /	OR	+270=		
* If the difference in column 1 is less than zero, enter "0" in column 2							L	TOTA		549	OR	TOTAL		
CLAIMS AS AMENDED - PART II									_	<i>-</i>	1011	OTHER	THAN	
		(Column 1)		(Colu		(Column 3) SMAI			L E	NTITY	OR	SMALL		
ENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE /	
AMENDMENT	Total	1.17	Minus	·· 3D		=		X\$ 9=	-	7	OR	X\$18=		
	Independent	•3	Minus	*** 5	<u> </u>	=	Ī	X40=			OR	X80=		
L	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDENT	CLAIM			+135=			OR	+270=	/	
							L	TOT	AL	/		TOTAL	/ -	
		(Column 1)		(Colur	mn 2)	(Column 3)	Α	DDIT. F	EE [1	J • • • • •	ADDIT. FEE	/	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	IEST BER , OUSLÝ	PRESENT EXTRA		RATE		ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=		X\$ 9=	.		OR	X\$18=		
	Independent	*	Minus	***		-		X40=			OR	X80=		
	FIRST PRESE	NTATION OF MU	JETIPLE DEI	PENDENT	CLAIM			+135=			OR	+270=		
							A	TOTA DDIT. FE			OR	TOTAL ADDIT. FEE	12.2.1	
		(Column 1)		(Colur	mn 2)	(Column 3)				h				
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE		ADDI- TIONAL : - FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=] [X\$ 9=			OR	X\$18=		
	Independent	*	Minus	***	- 1	=		X40=	1		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		-		1270-		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT FEE											OR	+270= TOTAL		
***	If the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pai	aid For" IN THI	S SPACE i	s-less tha	n 3, enter "3."	71	ODIT. FE	EL	ropriate box		ADDIT. FEE	,	